

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   |          |        |          |
| O.I.P.E. CLASSIFIER |          | 49     | 4/23/01  |
| FORMALITY REVIEW    | VD       | 501074 | 05/18/01 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original |          |
| 1        | 11/11/00 |
| 2        | 11/11/00 |
| 3        | 11/11/00 |
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| Claim    | Date     |
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| Final    |          |
| Original |          |
| 51       | 11/11/00 |
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| Claim    | Date |
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| Final    |      |
| Original |      |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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